

Commonsense Ten

607 14th Street, NW

Suite 800

Washington

DC

20011

FEC ID No. C00484642

☒ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 1

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Commonsense Ten		FEC IDENTIFICATION NUMBER <b>C</b> C00484642	
Check if <input checked="" type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Shorr Johnson Magnus		Date M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 1 0	
Mailing Address 1831 Chestnut Street Sixth Floor		Amount 756505.00	
City Philadelphia	State PA	Zip Code 19103	
Purpose of Expenditure Media Buy		Category/ Type	
Name of Federal Candidate supported or Opposed by expenditure: Dino Rossi		Office Sought: <input type="checkbox"/> House State: WA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2010 <input type="checkbox"/> Other (specify) : _____	
1503840.79		Transaction ID: D417400	

(a) SUBTOTAL of Itemized Independent Expenditures .....	756505.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	756505.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Jeffrey Forbes Signature	M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 1 0